

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	C.C.		11-27-01
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	S.B.	895	01-18-02
RESPONSE FORMALITY REVIEW	K	1019	03-28-02

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 (Through numeral)... Canceled      A ..... Appeal  
 - ..... Restricted      O ..... Objected

Claim	Date
Final Original	
1	2/8/02
2	2/12/02
3	2/12/02
4	2/12/02
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Claim	Date
Final Original	
51	2/12/02
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100	2/12/02

Claim	Date
Final Original	
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If more than 150 claims or 10 actions  
 staple additional sheet here

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